BUDGET WORKSHEET

Itemization of CURRENT income and expenses

Your Name:	Date:
Monthly Income from all sources:	Monthly expenses (continued):
Monthly deductions from paycheck(s):	Transportation expenses:
State and federal income taxes	Vehicle loan
Social Security taxes	License
Health/dental insurance	Vehicle taxes
Life insurance	Vehicle insurance
Retirement contributions	Vehicle maintenance
Child support withholding	Gas and oil
Other (itemize)	Other (itemize)
1	1
2	
3	3
MONTHLY NET INCOME:	Debts (itemize):
	1
Monthly expenses:	
Rent	3
Renter's insurance	
Food	Vacations
Utilities	Gifts
Telephone	School
Cable	Other miscellaneous (itemize):
Clothing	1
Health and dental expenses	2
(not covered by insurance)	3
Personal care	
Pet care	TOTAL MONTHLY EXPENSES:
PLEASE COMPLETE ALL INFORMATION AND RETURN TO YOUR SUPERVISOR	
For office use only: COMMENTS:	
Supervision Officer's Signature	